



| | | |
|---|------------|-------------------------|
| Date Mailed: October 21, 2002 | By: AW/emj | PTO DATE STAMP: |
| Application No.: 10/056,955 | | Docket No.: 50642.00023 |
| Applicant: Mitchell T. Weisman, et al. | | |
| Title: Distribution of Downloadable Software Over A Network | | |

The following has been received in the U.S. Patent Office on the date stamped hereon:

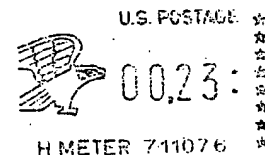
- | | |
|---|--|
| <input type="checkbox"/> Patent Application __ Pages __ Claims | <input type="checkbox"/> Response/Amendment |
| <input type="checkbox"/> Drawings Informal __ Sheets | <input type="checkbox"/> Petition for Extension of Time |
| <input type="checkbox"/> General Authorization / Request to Petition for Extensions of Time | |
| <input type="checkbox"/> Oath/Declaration | <input checked="" type="checkbox"/> Transmittal Form |
| <input type="checkbox"/> Assignment & Recordation Cover Sheet | <input type="checkbox"/> Notice of Appeal |
| <input type="checkbox"/> Verified Statement Claiming Small Entity Status | <input checked="" type="checkbox"/> Fee Transmittal (in duplicate) |
| <input type="checkbox"/> Continued Prosecution Application (§1.53(d)) | <input type="checkbox"/> Issue Fee Transmittal with PTO-85b (in duplicate) |
| <input type="checkbox"/> Provisional Application __ Pages | <input type="checkbox"/> Copy of PTO-1533, Notice to File Missing Parts |
| <input type="checkbox"/> Design Application __ Pages __ Drawings | <input checked="" type="checkbox"/> Info. Disclosure Statement & PTO-1449/Refs 3 |
| <input type="checkbox"/> Status Letter | <input type="checkbox"/> Request to Correct Filing Receipt |
| <input type="checkbox"/> Check No. _____ for \$ _____ | <input type="checkbox"/> Check No. _____ for \$ _____ |
| <input type="checkbox"/> Power of Attorney | <input type="checkbox"/> Other |
| <input checked="" type="checkbox"/> Certificate(s) of First Class Mailing | |

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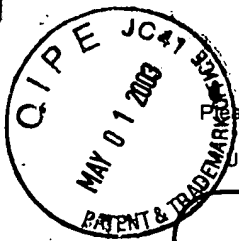
Technology Center 2100

U.S. DEPARTMENT OF COMMERCE
PATENT/TRADEMARK OFFICE
WASHINGTON, D.C. 20231



Squire, Sanders & Dempsey L.L.P.
600 Hansen Way, Suite 100
Palo Alto, CA 94304-1043





Please type a plus sign (+) inside this box → ☐

PTO/SB/21 (08-00)

Approved for use through 10/31/2002. OMB 0651-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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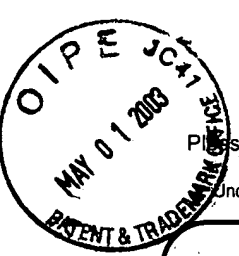
| | | | |
|--|----------------------|------------------------|-------------|
| TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i> | Application Number | 10/056,955 | |
| | Filing Date | January 25, 2002 | |
| | First Named Inventor | Mitchell T. Weisman | |
| | Group Art Unit | 2171 | |
| | Examiner Name | Unknown | |
| Total Number of Pages in This Submission | N/A | Attorney Docket Number | 50642.00023 |

| ENCLOSURES (check all that apply) | | |
|---|--|--|
| <input checked="" type="checkbox"/> Fee Transmittal Form (in duplicate) | <input type="checkbox"/> Assignment and Recordation Cover Sheet (for an Application) | <input type="checkbox"/> Request to Correct Filing Receipt |
| <input type="checkbox"/> Amendment / Response | <input type="checkbox"/> Drawing(s) _____ Sheets | <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences |
| <input type="checkbox"/> With RCE | <input type="checkbox"/> Licensing-related Papers | <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) |
| <input type="checkbox"/> After Final | <input type="checkbox"/> Petition | <input checked="" type="checkbox"/> Return Postcard |
| <input type="checkbox"/> Affidavits/declaration(s) | <input type="checkbox"/> Request for Continued Examination | <input type="checkbox"/> Status Letter |
| <input type="checkbox"/> Extension of Time Request (in duplicate) | <input type="checkbox"/> Power of Attorney | <input type="checkbox"/> Other Enclosure(s) (please identify below): |
| <input checked="" type="checkbox"/> 3 Reference(s) | <input type="checkbox"/> Terminal Disclaimer | RECEIVED MAY 02 2003 Technology Center 2100 |
| <input checked="" type="checkbox"/> IDS and Form 1449 | <input type="checkbox"/> Request for Refund | |
| <input type="checkbox"/> Certified Copy of Priority Document(s) | <input type="checkbox"/> CD, Number of CD(s) _____ | |
| <input type="checkbox"/> Response to Missing Parts/Incomplete Application | Remarks | |
| <input type="checkbox"/> Declaration/Oath | | |

| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT | |
|--|--|
| Firm or Individual name | Aaron Wininger, Reg. 45,229 Squire, Sanders & Dempsey, L.L.P. 600 Hansen Way Palo Alto, CA 94304-1043 |
| Signature | |
| Date | October 21, 2002 |

| CERTIFICATE OF MAILING | | | |
|--|----------------------|------|------------------|
| I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on this date: <input type="text" value="October 21, 2002"/> | | | |
| Typed or printed name | Eileen M. Janikowski | | |
| Signature | | Date | October 21, 2002 |

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PTO/SB/21 (08-00)
Approved for use through 10/31/2002. OMB 0651-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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151
6-4-03

TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Application Number 10/056,955

Filing Date January 25, 2002

First Named Inventor Mitchell T. Weisman

Group Art Unit 2171

Examiner Name Unknown

Total Number of Pages in This Submission

N/A

Attorney Docket Number 50642.00023

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ENCLOSURES (check all that apply)

☒ Fee Transmittal Form (in duplicate)

☐ Amendment / Response

☐ With RCE

☐ After Final

☐ Affidavits/declaration(s)

☐ Extension of Time Request
(in duplicate)

☒ 3 Reference(s)

☒ IDS and Form 1449

☐ Certified Copy of Priority
Document(s)

☐ Response to Missing Parts/
Incomplete Application

☐ Declaration/Oath

☐ Assignment and Recordation Cover
Sheet (for an Application)

☐ Drawing(s) _____ Sheets

☐ Licensing-related Papers

☐ Petition

☐ Request for Continued Examination

☐ Power of Attorney

☐ Terminal Disclaimer

☐ Request for Refund

☐ CD, Number of CD(s) _____

☐ Request to Correct Filing Receipt

☐ Appeal Communication to Board of
Appeals and Interferences

☐ Appeal Communication to Group
(Appeal Notice, Brief, Reply Brief)

☒ Return Postcard

☐ Status Letter

☒ Other Enclosure(s)
(please identify below):

October 21, 2002 Filing of IDS

Remarks

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm
or
Individual name

Aaron Wininger, Reg. No. 45,229
Squire, Sanders & Dempsey L.L.P.
600 Hansen Way
Palo Alto, CA 940304-1043

Signature

Date

April 28, 2003

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on this date: April 28, 2003

Typed or printed name

Aaron Wininger

Signature

Date

April 28, 2003

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PATENT & TRADEMARK OFFICE

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PTO/SB/17 (10-01)
Approved for use through 10/31/2002. OMB 0651-0032
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

FEE TRANSMITTAL for FY 2002

Patent fees are subject to annual revision.

☒ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 0

| Complete if Known | |
|----------------------|---------------------|
| Application Number | 10/056,955 |
| Filing Date | January 25, 2002 |
| First Named Inventor | Mitchell T. Weisman |
| Examiner Name | Unknown |
| Group / Art Unit | 2171 |
| Attorney Docket No. | 50642.00023 |

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METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit card ☐ Money Order ☐ Other ☐ None

☒ Deposit Account:

Deposit Account Number: 05-0150

Deposit Account Name: Squire, Sanders & Dempsey L.L.P.

The Commissioner is authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☒ Credit any overpayments

☐ Charge any additional fee(s) during the pendency of this application

☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

| FEE CALCULATION | | | | | |
|---------------------|----------|--------------|----------|------------------------|----------|
| 1. BASIC FILING FEE | | | | | |
| Large Entity | | Small Entity | | Fee Description | Fee Paid |
| Fee Code | Fee (\$) | Fee Code | Fee (\$) | | |
| 101 | 740 | 201 | 370 | Utility filing fee | |
| 106 | 330 | 206 | 165 | Design filing fee | |
| 107 | 510 | 207 | 255 | Plant filing fee | |
| 108 | 740 | 208 | 370 | Reissue filing fee | |
| 114 | 160 | 214 | 80 | Provisional filing fee | |
| SUBTOTAL (1) | | | | | (\$) 0 |

2. EXTRA CLAIM FEES

Total Claims: 0

Independent Claims: 3

Multiple Dependent: 0

Extra Claims: 0

Fee from below: 0

Fee Paid: 0

| Large Entity | | Small Entity | | Fee Description | Fee Paid |
|--------------|----------|--------------|----------|--|----------|
| Fee Code | Fee (\$) | Fee Code | Fee (\$) | | |
| 103 | 18 | 203 | 9 | Claims in excess of 20 | |
| 102 | 84 | 202 | 42 | Independent claims in excess of 3 | |
| 104 | 280 | 204 | 140 | Multiple dependent claim, if not paid | |
| 109 | 84 | 209 | 42 | ** Reissue independent claims over original patent | |
| 110 | 18 | 210 | 9 | ** Reissue claims in excess of 20 and over original patent | |
| SUBTOTAL (2) | | | | | (\$) 0 |

**or number previously paid, if greater; For Reissues, see above

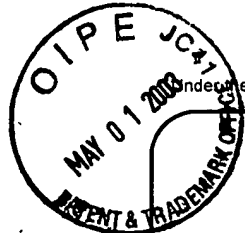
| FEE CALCULATION (continued) | | | | | |
|-----------------------------------|----------|--------------|----------|--|----------|
| 3. ADDITIONAL FEES | | | | | |
| Large Entity | | Small Entity | | Fee Description | Fee Paid |
| Fee Code | Fee (\$) | Fee Code | Fee (\$) | | |
| 105 | 130 | 205 | 65 | Surcharge - late filing fee or oath | |
| 127 | 50 | 227 | 25 | Surcharge - late provisional filing fee or cover sheet | |
| 139 | 130 | 139 | 130 | Non-English specification | |
| 147 | 2,520 | 147 | 2,520 | For filing a request for reexamination | |
| 112 | 920* | 112 | 920* | Requesting publication of SIR prior to Examiner action | |
| 113 | 1,840* | 113 | 1,840* | Requesting publication of SIR after Examiner action | |
| 115 | 110 | 215 | 55 | Extension for reply within first month | |
| 116 | 400 | 216 | 200 | Extension for reply within second month | |
| 117 | 920 | 217 | 460 | Extension for reply within third month | |
| 118 | 1,440 | 218 | 720 | Extension for reply within fourth month | |
| 128 | 1,960 | 228 | 980 | Extension for reply within fifth month | |
| 119 | 320 | 219 | 160 | Notice of Appeal | |
| 120 | 320 | 220 | 160 | Filing a brief in support of an appeal | |
| 121 | 280 | 221 | 140 | Request for oral hearing | |
| 138 | 1,510 | 138 | 1,510 | Petition to institute a public use proceeding | |
| 140 | 110 | 240 | 55 | Petition to revive - unavoidable | |
| 141 | 1,280 | 241 | 640 | Petition to revive - unintentional | |
| 142 | 1,280 | 242 | 640 | Utility issue fee (or reissue) | |
| 143 | 460 | 243 | 230 | Design issue fee | |
| 144 | 620 | 244 | 310 | Plant issue fee | |
| 122 | 130 | 122 | 130 | Petitions to the Commissioner | |
| 123 | 50 | 123 | 50 | Processing fee under 37 CFR 1.17 (q) | |
| 126 | 180 | 126 | 180 | Submission of Information Disclosure Stmt | |
| 581 | 40 | 581 | 40 | Recording each patent assignment per property (times number of properties) | |
| 146 | 740 | 246 | 370 | Filing a submission after final rejection (37 CFR § 1.129(a)) | |
| 149 | 740 | 249 | 370 | For each additional invention to be examined (37 CFR § 1.129(b)) | |
| 179 | 740 | 279 | 370 | Request for Continued Examination (RCE) | |
| 169 | 900 | 169 | 900 | Request for expedited examination of a design application | |
| Other fee (specify) | | | | | |
| *Reduced by Basic Filing Fee Paid | | | | | |
| SUBTOTAL (3) | | | | | (\$) 0 |

| SUBMITTED BY | | Complete (if applicable) | |
|-------------------|----------------|---------------------------------|------------------|
| Name (Print/Type) | Aaron Winingar | Registration No. Attorney/Agent | 45,229 |
| Signature | | Telephone | (650) 856-6500 |
| | | Date | October 21, 2002 |

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FEE TRANSMITTAL for FY 2002

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☒ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 0

Complete if Known

Application Number 10/056,955
Filing Date January 25, 2002
First Named Inventor Mitchell T. Weisman
Examiner Name Unknown
Group / Art Unit 2171

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MAY 02 2003

Attorney Docket No. 50642.00023

Technology Center 2100

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit card ☐ Money ☐ Other ☐ None
Order

☒ Deposit Account:

Deposit
Account
Number 05-0150

Deposit
Account
Name Squire, Sanders & Dempsey L.L.P.

The Commissioner is authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☒ Credit any overpayments
☒ Charge any additional fee(s) during the pendency of this application
☐ Charge fee(s) indicated below, except for the filing fee
to the above-identified deposit account.

FEE CALCULATION

1. BASIC FILING FEE

| Large Entity | | Small Entity | | Fee Description | Fee Paid |
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| Fee Code | Fee (\$) | Fee Code | Fee (\$) | | |
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| 108 | 740 | 208 | 370 | Reissue filing fee | |
| 114 | 160 | 214 | 80 | Provisional filing fee | |

SUBTOTAL (1)

(\$) 0

2. EXTRA CLAIM FEES

| Total Claims | Extra Claims | Fee from below | Fee Paid |
|--------------------|--------------|----------------|----------|
| | | | |
| Independent Claims | | | |
| Multiple Dependent | | | |

| Large Entity | | Small Entity | | Fee Description |
|--------------|----------|--------------|----------|--|
| Fee Code | Fee (\$) | Fee Code | Fee (\$) | |
| 103 | 18 | 203 | 9 | Claims in excess of 20 |
| 102 | 84 | 202 | 42 | Independent claims in excess of 3 |
| 104 | 280 | 204 | 140 | Multiple dependent claim, if not paid |
| 109 | 84 | 209 | 42 | ** Reissue independent claims over original patent |
| 110 | 18 | 210 | 9 | ** Reissue claims in excess of 20 and over original patent |

SUBTOTAL (2)

(\$) 0

**or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)

3. ADDITIONAL FEES

| Large Entity | | Small Entity | | Fee Description | Fee Paid |
|--------------|----------|--------------|----------|--|----------|
| Fee Code | Fee (\$) | Fee Code | Fee (\$) | | |
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| 179 | 740 | 279 | 370 | Request for Continued Examination (RCE) | |
| 169 | 900 | 169 | 900 | Request for expedited examination of a design application | |

Other fee (specify) _____

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3)

(\$) 0

SUBMITTED BY

Complete (if applicable)

Name (Print/Type) Aaron Winger Registration No. Attorney/Agent 45,229 Telephone (650) 856-6500
Signature Date April 28, 2003

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